

POSITION

INITIALS

ID NO.

DATE

## FEE DETERMINATION

(O.I.P.E. CLASSIFIER)

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

M-C

9/12/00

9-15-00

TJ  
Rm901  
#8110-17-00  
03-29-01

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	12/20/00
2	12/20/00
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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